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		Attorney Docket Number OSU1159-074D					
DECLARATION FOR UTILITY OR DESIGN		First Named Inventor Josephson et al.					
PATENT APPLIC	COMPLETE IF KNOWN						
(37 CFR 1.63)		Application Nu	mber				
Declaration Submitted With Initial Filing Submitted Submitted after Initial Filing Filing Submitted after Initial Filing	mitted after Initial	Filing Date	Nov	vember 20,	2000		
		Group Art Unit					
	Examiner Nam	е					
As a below named inventor, I he							
My residence, post office address,					ļ		
I believe I am the original, first and names are listed below) of the sub	sole inventor (if only lect matter which is cl	one name is listed belov aimed and for which a p	v) or an original, atent is sought	first and joint inver on the invention en	ntor (if plural titled:		
		-					
MULTI-CRITERIAL DECISION MAKING SYSTEM AND METHOD							
the specification of which	(Title	of the Invention)					
is attached hereto OR							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
l acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		py Attached?		
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
	I hereby claim the benefit under 35 U.S.C. 1 19(e) of any United States provisional application(s) listed below.						
Application Number(s)	(MM/DD/YYYY)		Monel escuisione	.i. cardination			
			Additional pro-				
		supplemental priority data sheet PTO/SB/02B attached hereto.					
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July 24, 1998

[Page 1 of 2]
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a valid OMB control number. - Utility or Design Patent Application DECLARATION I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 11 2, 1 acknowledge the duty to disclose information which is material to patentiability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filing date of this application. **Parent Patent Number** U.S. Parent Application or PCT Parent **Parent Filing Date** Number (MM/DD/YYYY) (if applicable) August 31, 2000 09/652,412 July 23, 1999 09/360,828 Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Paten and Trademark Office connected therewith: 🔀 Customer Number Number Bar Code OR I Rhel hero Registered practitioner(s) name/registration number listed below Registration Registration Name Number Name Number Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto Direct all correspondence to: X Customer Number OR Correspondence address below or Bar Code Label Name PATENT TRADEMARK OFFICE Address <u>Address</u> ZIP City State Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle [if any]) Family Name or Surname Josephson John R. Inventor's Date Signature USA Ohio USA Worthington Country Residence: City 93 East Rivergreen Drive Post Office Address Post Office Address USA 43085 Country Worthington state Ohio 71P

oxtime Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto





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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1 Page of 1

Name of Additional Joint Inventor, if any:						ventor					
Given Name (first and middle [if any])					Family Name or Surname						
Balakrishtan Chandrasekaran											
Inventor's Signature	Betalululu						Date		o/24/2000		
Residence: City	Columbus	Sta	te	Ohio	Coi	untry	USA		Citizens	ship (JSA
Post Office Address	ss 2053 Iuka Avenue										
Post Office Address	Post Office Address										
City	Columbus	Sta	te	Ohio	ZI	IP 4	3201	Country	/ USA	.	
Name of Additio	Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Na	me (first and middle [if any])					Family Nar	ne or S	urname		
Mark Carroll											
Inventor's Signature	M.(_		V.						Da		
Residence: City	Columbus	Sta	e (Ohio	Country USA Citizenship Brit					British	
Post Office Address	5420 Ravine Bluff Co	ourt									
Post Office Address											
City	Columbus	Sta	te	Ohio		ZIP	43231-3157	Coun	itry U	SA	
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor											
Given Na	Given Name (first and middle [if any]) Family Name or Surname										
Naresh Sundaram Iyer											
Inventor's Signature	5) Alex 10 24 50 Date										
Residence: City	Columbus	Stat	e	Ohio	Cou	untry	USA		Citize	nship	
Post Office Address	1524 Neil Avenue										
Post Office Address									·		
City	Columbus	State	ļ	Ohio		ZIP	43201	C	ountry	USA	1

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